



Docket No.: M4065.0322/P322-A  
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re Patent Application of:  
Eric T. Stubbs et al.

Application No.: 10/620,612

Confirmation No.: 9666

Filed: July 17, 2003

Art Unit: 2186

For: INTEGRATED SEMICONDUCTOR  
MEMORY CHIP WITH PRESENCE DETECT  
DATA CAPABILITY

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Examiner: M. D. Anderson

**AMENDMENT AFTER FINAL ACTION (37 C.F.R. SECTION 1.116)**

MS AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

**INTRODUCTORY COMMENTS**

In response to the Office Action dated March 30, 2005 (Paper No. 20050328), finally rejecting claims 34-44 and 53-57, please amend the above-identified U.S. patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 6 of this paper.



AF JW

<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. M4065.0322/P322-A	
Application No. 10/620,612-Conf. #9666		Filing Date July 17, 2003		Examiner M. D. Anderson	
Art Unit 2186					
Applicant(s): Eric T. Stubbs et al.					
Invention: INTEGRATED SEMICONDUCTOR MEMORY CHIP WITH PRESENCE DETECT DATA CAPABILITY					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
<b>Total Claims</b>	15	- 24 =		x	
<b>Independent Claims</b>	2	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00
<input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1073</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Gianni Minutoli Attorney Reg. No.: 41,198				Dated: <u>June 28, 2005</u>	
DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP 2101 L Street NW Washington, DC 20037-1526 (202) 828-2232					